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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ALAN M. GROSS, P.A.

ATTORNEYS AND COUNSELORS AT LAW
4731 CENTRAL AVENUE
ST. PETERSBURG, FLORIDA 33713
PHONE: (727) 327-0100
FACSIMILE: (727) 327-1797

agross@alangrosslaw.com

June 8, 2012

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, Florida 32314

Re: Articles of Organization for Aubrey Malcolm Collection, LLC

Dear Sir:

Enclosed for filing is the Articles of Organization for Aubrey Malcolm Collection, LLC. Also enclosed is our check in the amount of \$130.00 covering the filing fee.

If you have any questions regarding this matter, please feel free to contact me.

Sincerely,
ALAN M. GROSS, P.A.


for
Alan M. Gross, Esq.

AMG/tr
enclosures
cc: William Aubrey Shepherd
David Bewley

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Aubrey Malcolm Collection, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alan M. Gross, Esq.
Name of Person

Alan M. Gross, P.A.
Firm/Company

4731 Central Avenue
Address

St. Petersburg, Florida 33713
City/State and Zip Code

agross@alangrosslaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alan M. Gross at (727) 327-0100
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
12 JUN 11 PM 9:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Aubrey Malcolm Collection, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

6020 Luana Lane S.
Gulfport, Florida 33707

Mailing Address:

6020 Luana Lane S.
Gulfport, Florida 33707

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Alan M. Gross, Esq.

Name

4731 Central Avenue

Florida street address (P.O. Box **NOT** acceptable)

St. Petersburg FL 33713

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:
"MGR" = Manager
"MGRM" = Managing Member

Name and Address:

MGRM

William Aubrey Shepherd
6020 Luana Lane S.
Gulfport, Florida 33707

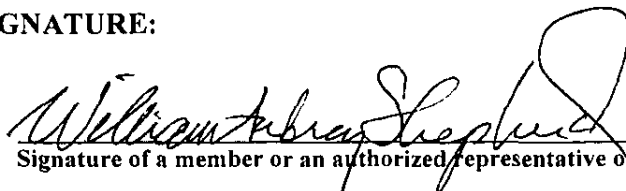
MGRM

David Bewley
6020 Luana Lane S.
Gulfport, Florida 33707

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

William Aubrey Shepherd
Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)